MRSA/CDI Prevention Initiative

Helping to Train the Healthcare Professional

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MRSA/CDI Prevention Initiative

- Surveillance of Healthcare-Associated and Resistant Pathogens (SHARP) Unit
- Located within the Surveillance and Infectious Disease Epidemiology Section (SIDE) at the Bureau of Disease Control, Prevention, and Epidemiology of the Michigan Department of Community Health
- www.michigan.gov/hai

MRSA: Organism and Infections

(Methicillin-resistant Staphylococcus aureus)

- A strain of Staphylococcus aureus that is resistant to certain antibiotics called betalactams
- A cluster forming bacteria
- MRSA infections
 - Mild: skin and soft tissue
 - usually community acquired
 - More severe: pneumonia or septicemia.

MRSA: Symptoms and Risk Factors

- Symptoms based on infected body site(s)
- Biggest risk factor is open or broken skin (e.g. wound or surgical site)
- High risk in people:
 - With underlying health conditions
 - Who have been in the hospital or a nursing home
 - Who have been treated with antibiotics

MRSA:Transmission and Treatment

- Transmission is person-to-person by contaminated hands and surfaces
- Treatment varies by type and location of infection
- Incision and drainage common for purulent skin infections
- Antibiotic treatment
 - guided by susceptibility profile of the organism

MRSA Burden

- Recent estimates suggest that 49-65% of healthcareassociated S. aureus infections reported to the National Health and Safety Network (NHSN) are caused by methicillin-resistant strains
- National population-based estimates of invasive MRSA infections
 - 94,360 invasive MRSA infections annually in the US
 - Associated 18,650 deaths each year
 - 86% of all invasive MRSA infections are healthcareassociated
- Hidron et al. Infect Control Hosp Epidemiol 2008;29:996-1011

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CDI: Organism and Symptoms (Clostridium difficile) Infection

- Clostridium difficile (C. diff) is a positive, anaerobic, toxinproducing, spore-forming bacteria.
- Leading cause of infectious diarrhea in healthcare settings.
- CDI illness symptoms:
 - Watery diarrhea
 - Fever
 - Loss of appetite
 - Nausea
 - Abdominal pain/tenderness

CDI and You

- Lives in the intestinal tract of humans and animals
- Can be found in the intestines of healthy people
- Is usually kept under control by other normal bacteria
- Normal bacteria die with antibiotic use allowing C. diff to multiply and produce toxins
- Causes diarrhea or inflammation of the colon

CDI Burden

- 94% are related to health-care exposures and are potentially preventable by reducing unnecessary antibiotic use and interrupting patient-to-patient transmission
- Nearly 75% of all CDIs related to U.S. health care have an onset outside of hospitals
- 52% of the CDIs treated in hospitals are present on admission
- CDC MMWR Vital Signs March 9, 2012 61(09);157-162

The Case for HAI Elimination

- 1 in 20 patients have an infection while receiving healthcare treatment in US hospitals
- Nationally, there are approximately 1.7 million long-term care beds in which 1.6 to 3.8 million infections are estimated to occur annually
- Infections in long-term care residents may account for between 23,100 to 70,000 deaths annually in the US.

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Established September 28, 2011 and includes representation from:

- MDCH
- Michigan Society for Infection Prevention and Control (MSIPC)
- Michigan Health and Hospital Association(MHA) Keystone Center for Patient Safety and Quality
- MPRO (Michigan's quality improvement organization)
- Long Term Care
- Michigan Association of Local Public Health (MALPH)

MRSA/CDI Prevention Collaborative Goal

 The Collaborative works to integrate evidence based best practices along the continuum of care to reduce and eliminate the occurrence of MRSA and CDI among Michigan citizens

The Initiative Focus

- Acute care and skilled nursing care facilities can work together to reduce MRSA and CDI among patients that share the health care services provided within their regions
- Recognize the benefits of improving transfer of care communication
- Build collaborative community relationships with focus on sharing best practices to prevent and reduce MRSA and CDI infections



The Data Plan

- Data collected monthly
- MRSA and CDI laboratory identified (LabID) event and summary data
 - Acute care facilities submit electronically via National Health and Safety Network (NHSN)
 - Skilled nursing facilities submit (secure) fax form that mirrors the NHSN data collection tool
- 6 months of baseline data and 18 months follow up data being collected
- Monthly reports provided back to facilities

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Champion Conference Calls

- Quarterly calls
- · Webinar format
- Champions give presentations, share policies, and/or resources used in their action plans
- Calls provide networking between the champions

MRSA and CDI Train the Trainer Package Available at www.michigan.gov/hai

- Intended audience
 - Local public health departments
 - Skilled nursing facilities
- Package includes
 - Handouts
 - Sign in sheets
 - Pre- and post-presentation quiz
 - Power Point Presentation
 - Resources and Websites

Train the Trainer Instructions Department of Community Health Fig. 10 Fi

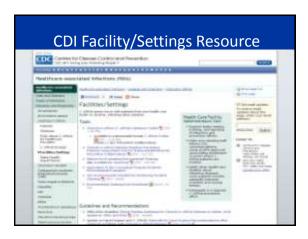












Educate! Educate! Educate!

- Educate yourself on MRSA and CDI
- Educate others on MRSA and CDI
- Be a community resource with appropriate information
- Take advantage of opportunities to participate infection control meetings
- Be recognized as an "expert" source of information to your community health care providers

Education and Training





Thank you!

• To find out more information:

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